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Policy Manual Number: 025.005	Chapter: CoverKids	

COVERKIDS

Legal Authority: 42 CFR 457.310; 42 CFR 457.315; 42 CFR 457.320; 42 CFR 457.330; 42 CFR 457.348; 42 CFR 457.535; Tenn. Comp. R. & Regs. 1200-13-20

1. Overview

CoverKids is Tennessee's Children's Health Insurance Program (CHIP). CHIP is authorized by Title XXI of the Social Security Act. Similar to Medicaid, CHIP is jointly financed and administered by the federal and state governments.

2. Policy Statement

CoverKids is available to children who are under age 19, not eligible for TennCare Medicaid, whose household income is at or below 250% of the Federal Poverty Level (FPL) based on Eligibility Determination Group (EDG) size, and who meet all non-financial eligibility requirements.

CoverKids is available to unborn babies of pregnant women not eligible for TennCare Medicaid, whose household income is at or below 250% of FPL based on EDG size, and who meet all non-financial eligibility requirements.

3. Coverage Period

Children under age 19 determined eligible for CoverKids receive coverage for 12 continuous months except in the following instances:

- **a.** The child turns 19:
- **b.** Coverage is voluntarily terminated;
- **c.** The child is no longer a resident of Tennessee;
- **d.** The State determines that eligibility was erroneously granted at the most recent eligibility determination or renewal of eligibility because of state error, or fraud, abuse, or perjury attributed to the child or the child's representative;
- e. Death; or
- **f.** The child is determined eligible in a TennCare Medicaid category.

Pregnant women remain eligible for CoverKids benefits through a 60 day postpartum period, beginning the last day of the pregnancy and ending on the last day of the month in which the 60 day period ends. The 60 day postpartum period is automatic and applicable to all pregnant women who have applied, been determined eligible for and received CoverKids benefits with an effective date on or before the end of the pregnancy. The postpartum coverage period is applied regardless of any change in household income and regardless of how the pregnancy ends.

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4. Newborns

CoverKids benefits are deemed available to infants not eligible for TennCare Medicaid when the infant's mother has CoverKids eligibility at the time of birth.

TennCare Medicaid benefits are available for infants born to a CoverKids enrollee with household income at or below 195%. Eligibility begins the date of birth.

5. Co-Pay Responsibility

CoverKids enrollees may be required to pay co-pays for covered services and pharmacy benefits. Individuals with verified American Indian/Alaskan Native status receive additional cost-sharing benefits.

6. Non-Financial Eligibility Requirements

Individuals eligible for CoverKids must meet all non-financial eligibility requirements. Additional information about each condition of eligibility is available in the Non-Financial Eligibility chapters.

- **a. Age:** A child must be under age 19.
- **b.** Citizenship: A child must be a U.S. Citizen, U.S. National or eligible non-citizen. The unborn child of a pregnant woman is presumed to be a U.S. citizen, regardless of the citizenship or immigration status of the mother.
- **c. Enumeration:** An individual eligible to receive a Social Security Number (SSN) must possess and provide a valid SSN or proof of application for an SSN, unless she meets an exception. See the *Enumeration* policy.
- **d. State Residence:** The individual must be a resident of Tennessee.
- e. Pregnancy: TennCare accepts self-attestation of pregnancy at application or as a reported change, unless TennCare has information that is not reasonably compatible with such attestation. If TennCare has information that is not reasonably compatible with an attested pregnancy, TennCare will contact the individual and may request written medical verification of the pregnancy.
- **f. Primary Health Insurance:** CoverKids must be the individual's only health insurance plan. Health insurance plans include:
 - i. Employer sponsored insurance;
 - ii. COBRA:
 - iii. Medicare;
 - iv. TRICARE:
 - v. Peace Corps; and

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vi. Other comprehensive medical coverage.

Individuals enrolled in a limited benefit policy will not be considered to be enrolled in other insurance. A limited benefit policy is health coverage for a specific disease (e.g., cancer), or an accident occurring while engaged in a specified activity (e.g., school-based sports), or which provides for a cash benefit payable directly to the insured in the event of an accident or hospitalization (e.g., hospital indemnity).

If the applicant is a pregnant woman with health insurance, she may be eligible for pregnancy benefits if her health insurance does not cover pregnancy-related care.

7. Financial Eligibility Requirements

a. Eligibility Determination Group

The EDG for CoverKids uses Modified Adjusted Gross Income (MAGI) methodology. It is possible for household members to have different household sizes when determining eligibility. When determining EDG size for a pregnant woman, the pregnant woman is counted as herself plus the number of children she is expected to deliver. When determining EDG size for other applicants in the household, the pregnant woman is counted as one person. For additional information regarding EDG size, see the *Eligibility Determination Group for MAGI* policy.

b. Income Standard

Individuals must have income at or below 250% FPL.

c. Budget

Ms. Wilson applied for medical assistance for her 10 year old son. Ms. Wilson is employed with a Net Countable Earned Income of \$3,000. Her Before/Pre-tax Contributions total \$150. The example budget is based on an EDG size of two and determines eligibility for the child with an Income Test Limit of \$3,430 (250% FPL).

Ms. Wilson's Remaining Countable Earned/Self-Employment amount, \$2,850, is over the Income Test Limit for Child 6 to 18 MAGI, \$1825. However, the income is under the Income Test Limit for CoverKids, \$3430. The MAGI 5% Deduction is not applied because the Total Net Countable Income is under the Income Test Limit for the CoverKids category.

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Income Budget Calculation		
Net Countable Self-Employment Income		\$ 00.00
Net Countable Earned Income		\$ 3,000.00
Before/Pre-tax Contribution Deductions	-	\$ 150.00
Remaining Countable Earned/Self-Employment Amount	=	\$ 2,850.00
Net Countable Unearned Income	+	\$ 0.00
Countable Earned and Unearned Income	=	\$ 2,850.00
1040 Deduction	-	\$ 0.00
MAGI 5% Deduction	-	\$ 0.00
Net Countable Income	=	\$ 2,850.00
Income Test Limit		\$ 3,430.00
Gap Filling Amount	-	\$ 0.00
Total Net Countable Income	=	\$ 2,850.00
Income Test Result		PASS

The above budget is current as of December 2018.

8. Resource Test

There is no resource test for CoverKids applicants.

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02.01.2016	1-6.	Overview of the	1-2	Policy Change	NF	
		CoverKids Program;				
		Policy Statement;				
		Coverage Period;				
		Newborns; Co-Pay				
		Responsibility; Non-				
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				Change		
04.06.2018	3-4.; 6.f.	Coverage Period;	1 -3	Policy Clarification	JH	
	ŕ	Newborns; Primary Health				
		Insurance				
03.18.2019	1.; 6.c.	Overview; Enumeration	1-2	Non-Substantive	SN	
	,	,		Change		
03.18.2019	2.; 3.;	Legal Authority; Policy	1; 3-4	Policy Clarification	TB	
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		Determination Group;				
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